

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90099 015 \*\*\*\*61.25

<b>DOCUMENT # 719684</b> 1. Entity Name <b>MAITLAND ART ASSOCIATION, INC.</b>					
Principal Place of Business <b>231 W PACKWOOD AVE MAITLAND, FL 32751-5596</b>			Mailing Address <b>231 W PACKWOOD AVE MAITLAND, FL 32751-5596</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-1312244</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>SHEPP, JAMES G 231 W PACKWOOD AVE MAITLAND, FL 32751</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)	
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>		10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T1VC CLAWSON, STEVEN P 2101 E. CONCORD STREET ORLANDO, FL 32803		<input checked="" type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT HARPER, WALLACE G 223 E. CANTON AVENUE WINTER PARK, FL 327893844		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T2VC MATHIS, KIMBERLY 2815 NORRIS AVENUE WINTER PARK, FL 32789		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS COCKERELL, PRISCILLA 9163 GREAT HERON CIRCLE ORLANDO, FL 32836		<input checked="" type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT VAUGHN, RENAE 241 WOOD LAKE DRIVE MAITLAND, FL 32751		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		T1VC Bowser, Richard 3011 Saratoga Drive Orlando, FL 32806			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Immediate Past Chair			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Trustee Chair			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TS Savage, Karen 2612 Park Place Drive Winter Park, FL 32789			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		T2VC Victor Diaz 1101 N Lake Destiny Dr, Suite 105 Maitland, FL 32751			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>Kimberly D. Mathis</i>				April 16, 2008	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				407.647.4510	

Kimberly Mathis, Chair, Board of Trustees